

Secondary Prior Authorization Requirements

Is Prior Authorization required for ABA Services when Medicaid is secondary insurance?

MCO NAME	Y or N	ADDITIONAL RESPONSE
Aetna	No	Aetna Better Health does not require authorization for ABA services if a member has primary insurance. If primary insurance denies coverage, Aetna Better Health will review the request for medical necessity.
AmeriHealth Caritas	Yes	ACLA does require prior authorization for ABA services when there is a primary carrier if the provider plans to bill Medicaid for the services.
Healthy Blue	No	Healthy Blue does not require an authorization for secondary claims in which the primary carrier adjudicated the claim and either made a payment or applied the provider's payment to the member's co-pay, deductible or coinsurance. Generally, if the primary carrier denies the service, then the provider would need to obtain an authorization from Healthy Blue. Healthy Blue strongly suggests for all providers to obtain an authorization for ABA services when a member has other health insurance. All out of network providers require an authorization.
Louisiana Healthcare Connections	Yes	LHCC's prior authorization does take into consideration whether or not the member has other insurance. If the primary insurance carrier pays the claim, LHCC will override the authorization edits, regardless of the authorization rules and pay. If the primary insurance carrier denies for no authorization and an authorization is required and not obtain, LHCC will require authorization.
United Healthcare	No	United Healthcare does not require an authorization for ABA services when there is other insurance. If other insurance has paid on an ABA claim, UHC waives the requirement for an authorization.